

PTO/SB/80 (11-08)

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54205

*OR*

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## Assignee Name and Address:

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ONE NEW YORK PLAZA  
NEW YORK, NEW YORK 10004

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## SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	3/27/09
Name	David N. Lawrence	Telephone	212-902-1000
Title	Managing Director		

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